## INTERPRETING INVOICE FOR THE U.S. DISTRICT COURT FOR THE DISTRICT OF NEW JERSEY (Revised 3/24/08)

INTERPRETER'S INFO					
Interpreter's Name:					
Payee (if different)			Tax ID Nu	mber:	
Address:					
City:					
Telephone Number(s):		F	Pager/Cell:		
Qualification:					
CASE INFORMATION: Case Name/Defendant(s):					
Case Number:	Assistant U.S.	Assistant U.S. Attorney's Name:			
Name of Judge/Mag-Judge	:				
SERVICES RENDERED Date:	:				
Languages: English and		Type o	of Proceeding:		
( ) In Court ( ) Out of Co	ourt ( ) Both F	Place:			
Travel expenses* - Mileag travel reaches or exceeds th outside NJ; or travel is to a	airty (30) miles for mi	iles beyo	nd 60 miles roun	d trip; or travel is from	
Mileage: # miles x	<b>\$0.505</b> =		Fee for Servi	ces:	
Tolls (if any): Parking:	* *				
OR: Public transportation *Travel expenses: Receipts		*	Travel expens	es:	
for reimbursement	EDITE AND ACCUS	A TE	Total Due: _		
I CERTIFY THIS TO BE T					
Date:	Signature:				

Mail to: United States District Court; MLK Bldg, 50 Walnut Street, Newark, NJ 07101 - Att. Sara Garcia Rangel or fax to 973-645-4431. Phone: 973-625-4621